



CITY OF GLOUCESTER

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Public Health
Prevent. Promote. Protect.

MOBILE FOOD UNIT/PUSHCART APPLICATION

Application Fee: \$ 150.00 w/Potentially Hazardous Foods _____
\$ 100.00 w/o Potentially Hazardous Foods _____

NAME OF PERSON IN CHARGE CERTIFIED IN FOOD PROTECTION MANAGEMENT (Food Service Establishment ONLY)

Please attach copy of certificate:

Name: _____ Phone No: _____ Certification No: _____

Name of Business: _____

Owners Name: _____

Applicant's Name: _____

Address: _____

Mailing Address (if different): _____

Telephone: _____ Email: _____

Have you obtained a Hawkers and Peddlers license from the:

State Division of Standards: Yes () No () City Clerks Office: Yes () No ()

Base of Operation:

Name: _____

Address: _____

City/Town: _____

Telephone: _____ Type of Establishment: _____

Owner/Manager: _____

Permit No: _____ **VEHICLE REG #:** _____

Signature of Food Inspector: _____